FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12" Ste. 1A Des Morrès, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

2012 JUL 19 AM 8: 50

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Brady Hanson	F Organization)			
			FORM	
IMPORTANT Indicate by # type of committee you are reporting 1.) Statewice Legislative/Judge Standard for the control of the co	a to:		DR-2	
1 (4) County Control Country of Retention Candid	ale (2) State BAC (2)			DISCLOSUR
(4) County Central Committee (5) County Candidate (6) City Subdivision Candidate (8) County PAC (9) City PAC (10) Sc 11) Local Batter (equal to the county PAC (9) City PAC (10) Sc	Candidate (7) School Board or Other Polity	· al	(Rev. 12/2009)	REPORT
	thool Board or Other Political Subdivision PA	C	For Office Use On	ly
CANDIDATE COMMITTEES ONLY			Comm. # 18	934
Candidate Name Brady Hanson	California		Logged in	
orady manson	Political Party (if applicable) Republican		Scanned	
Office Sought				
Monona County Superviso:	District (I Senate or House)		Airord	
ate reports are subject to possible chil and criminal penalties andicate's committee, and the charperson, for any other type			Audited	
andicate's committee, and the charperson, for any other type	Pursuant to lowa Code sections 689 33	0.00	501	
// ioi any other type	of committee is the individual responsibilities.	e for fin	58A.461(3) the can	didate for a
124-171		- 101 1 11	s urnery and accurat	e reports
Merinel Harren	7/2 2-5			
IGNATURE OF PERSON-FILING REPORT	112-353-65	76	7-18-	12
· · · · · · · · · · · · · · · · · · ·	7/2-353-65 TELEPHONE		DATE SK	SKED
AM FILING A				
Annual Control of the	REPORT FOR (1) ELECTION	/(2)NO	LEI ECTION	
CHECK IS NAVA TO THE CONTROL OF THE CASE O	indicate by	H 7	TELECTION YEAR	7
CHECK IF AMENDMENT TO REPORT DATED	The state of the s			
		Lecal Co	mmittees, enter Date	of Floor
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 of	e of Dissol tion Form Do a	11/06/1		or Election
(You must continue to file reports until a DR-3 is fi	EU.)	County &	Local Commun.	
MATERIAL PROPERTY AND ADDRESS OF THE PARTY AND	1			nter County in
STATEMENT		Monon	a	
STATEMENT OF CASH ON HA	ND	hancowhereness		
committee. This amount MUST be the same as the	transfer and			
committee. This amount MUST be the same as the of the last reporting period or must be zero if this same.	e cash on hand at the cash			
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For Instructions, See Back of Form SCHEDULE Reset Form CONTRIBUTIONS -- MONEY TAKEN IN Α MONETARY (Including candidate's personal funds) (Rev. 07/03) RECEIPTS COMMITTEE NAME (Must be same as on Statement of Organization) CHECK THIS BOX IF AMENDING FORM Brady Hanson STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD. CAUTION: Section 68B 32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees DATE PAC ID NUMBER NAME AND ADDRESS OF CONTRIBUTOR RECEIVED RELATIONSHIP (if applicable) **AMOUNT** IF FOR (MM/DD/YR) TO CANDIDATE* AND PAC CHECK RECEIVED FUND-(if applicable) NUMBER RAISER INCOME Vincent R. Willey 06/13/12 CK#₉₆₁₃ \$50.00 None ID# CK# ID# CK# ID# CK# ID# CK# 9 C.9 ID# CK#

TOTAL (if last page of this schedule)

SUB-TOTAL

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by familial relationship, enter "not applicable" in the relationship column.

CK#

ID# CK#

Page of (for Schedule A)

\$ 50.00

\$ 50.00

COMMITTEE NAME (Must be same as on Statement of Organization)	SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
Brady Hanson	(1101.00/3/)	CONTRIBUTIONS
Reset Form		THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
05/23/12	Brady Hanson 34506 Hwy E34 Castana, 1A 51010	Self	Ryan Publish. Ad for Primary	\$ 28.50	CONTRIBUTION
05/27/12	Brady Hanson	Self	Items to hand out for campaign	628.72	
05/27/12	Brady Hanson	Self	Onawa Democrat Ad for Primary	30.00	
06/04/12	Brady Hanson	Self	Notepads for campaign	172.42	
06/04/12	Brady Hanson	Self	Pens for campaign	161.22	
06/04/12	Brady Hanson	Self	signs for campaign	299.02	
06/04/12	Brady Hanson	Self	Onawa Sentincl Ad for Primary	24.00	
06/04/12	Brady Hanson	Self	Mapleton Press Ad for Primary	48.00	
17/03/12	Brady Hanson	Self	Candy for parades for campaign	72.03	
		An an anguna fini di anguna angun	SUB-TOTAL	\$ 1,463.91	
			TOTAL (if last	\$ 1,463,91	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no familial relationship, enter not applicable in the relationship column.

of 1 (far Schedule E) Page_

HALL LEE HALL	ME(Must be same as on Statement of Organization)	RESET	SCHEDULE L
dy Hanson	and the state of t		(Rev. 02/08)
E: This sched	ule reports money loaned to the committee which is depos	ited in the committee account	CHECK THIS
	OANS FROM LAST REPORTING PERIOD \$		AMENDING F
TI- MONETA	ARY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD source of loan, such as a bank, must be shown if a third pa		didate's personal funds.
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicab	AMOUNT OF LO
6-01-12	Brady Hanson 34506 Hwy E34 Castana IA 51010		\$ 2500
T II - MONET (Loans f	ARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PE orgiven must be reported on Schedule E In-kind Contribu	TOTAL (PART I) ERIOD utions.)	\$_2500.00
T II - MONET (Loans fo DATE PAID MM/DD/YR)	NAME AND ADDRESS OF LENDER	ERIOD utions.) RELATIONSHIP TO	AMOUNT REPAIL
DATE PAID	orgiven must be reported on Schedule E In-kind Contribu	ERIOD utions.)	AMOUNT REPAIL
DATE PAID	NAME AND ADDRESS OF LENDER	ERIOD utions.) RELATIONSHIP TO	AMOUNT REPAIL
DATE PAID	NAME AND ADDRESS OF LENDER	ERIOD utions.) RELATIONSHIP TO	AMOUNT REPAIL
DATE PAID	NAME AND ADDRESS OF LENDER	ERIOD utions.) RELATIONSHIP TO	AMOUNT REPAIL
DATE PAID	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	ERIOD utions.) RELATIONSHIP TO	AMOUNT REPAIL

making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page_____of____(for Schedule F)